Effective October 1, 2000

Application or Docket Number

214404 US25RD

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE				OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			20				Ī	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		l	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2√7 minus 20=		• •			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			(2 minus 3 =		• 9		1	X40=		OR	X80=	720	
MU	LTIPLE DEPEN	RESENT	ESENT				+135=		OR	+270=	7 - 0		
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2		TOTAL		OR	TOTAL	1430	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
		(Column 1)		(Colu	mn 2)) (Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	PENDEN	TCLAIM			+135=		OR	+270=		
								TOTAL			TOTAL		
l		(Column 3)		ADDIT. FEE	<u></u>	10	ADDIT. FEE						
<u> </u>		(Column 1) CLAIMS	And a series of the series of	HIG	ımn 2) HEST		li		ADDI-			ADDI-	
N N B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY) FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***]=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	IULTIPLE DEF	PENDEN	IT CLAIM			+135=		OR	+270=		
l								TOTAL		OR	TOTAL		
								ADDIT. FEE		1011	ADDIT. FEE	<u> </u>	
 		(Column 1) CLAIMS			umn 2) HEST	(Column 3)	1			1		T	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUI PREV	MBER VIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	,	OR	X\$18=	ï	
MEI	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESI	ENTATION OF N	MULTIPLE DE	PENDE	NT CLAIN	1						1	
				_				+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
"	the "Highest N⊓." The "Highest Nu	umber Previously mber Previously P	raid For" (Total o	r Indeper	⊏ is iess th ndent) is th	ian 3, enter "3." ne highest numb	er fo	ound in the ap	propriate bo	ox in c	olumn 1.		